

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>7-29-03</u>		2 Serial/Patent # <u>09710760</u>									
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT								
<input type="checkbox"/> Filing			\$								
<input checked="" type="checkbox"/> Amendment			\$								
<input checked="" type="checkbox"/> Extension of Time	#160	5-12-03	\$ 1450.00								
<input type="checkbox"/> Notice of Appeal/Appeal			\$								
<input type="checkbox"/> Petition			\$								
<input type="checkbox"/> Issue			\$								
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$								
<input type="checkbox"/> Maintenance			\$								
<input type="checkbox"/> Assignment			\$								
<input type="checkbox"/> Other			\$								
		7 TOTAL AMOUNT OF REFUND		\$							
		8 TO BE REFUNDED BY:									
		<input checked="" type="checkbox"/> Treasury Check									
		<input checked="" type="checkbox"/> Credit Deposit A/C #:									
		9 <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 30px; text-align: center;">5</td> <td style="width: 30px; text-align: center;">0</td> <td style="width: 30px; text-align: center;">--</td> <td style="width: 30px; text-align: center;">1</td> <td style="width: 30px; text-align: center;">7</td> <td style="width: 30px; text-align: center;">0</td> <td style="width: 30px; text-align: center;">1</td> </tr> </table>			5	0	--	1	7	0	1
5	0	--	1	7	0	1					
10 REASON:											
<input type="checkbox"/> Overpayment											
<input checked="" type="checkbox"/> Duplicate Payment											
<input checked="" type="checkbox"/> No Fee Due (Explanation):											
<div style="border: 1px solid black; padding: 5px; min-height: 40px;"> EOT must be filed within the maximum extendable time frame. </div>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Lana Chase</u>		TITLE: <u>Paralegal</u>									
SIGNATURE: <u><i>Lana Chase</i></u>		PHONE: <u>703-306-0482</u>									
OFFICE: <u>Off. of Petitions</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u><i>Alicia Kelly</i></u>		DATE: <u>7/31/03</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: